

APPENDIX C

Instructions For Preparation of DA Form 5005-R (Engineering Change Proposal – Software [ECP-S])

C.1 General. DA Form 5005-R (pages C-3 and C-4) is a dual-purpose form used to report software problems and to propose changes to software baselines. Individuals preparing the form will mark the appropriate box in the top right hand block. For further guidance, see DA Pam 25-6.

C.2 Instructions for completing DA Form 5005-R.

a. Block 1. To: Enter address of the GCSS-Army Project Management (PM) Office: Department of the Army, PM, GCSS-Army, ATTN: SFAE-PS-RS, 800 Lee Ave, Fort Lee, Virginia, 23801.

b. Block 2. From: Enter mailing address of originator. Include name of individual preparing form if other than point of contact.

c. Block 3. Originator number. Enter 10- (or 11-) position number constructed as follows:

(1) Structure of Originator Number: AIS code (first three characters) -Data processing installation code (next four characters) -Sequence code (next three characters) -Environment (single character, optional).

(2) The 10-position originator number (plus the optional environment code) is constructed of four distinctive sets of characters with the following definitions:

(a) AIS code. This three-position code is used to identify the system with the problem or ECP-S.

(b) Data processing installation code. This four-position code is used to identify the activity submitting DA Form 5005-R.

(c) Sequence number. This three-position code is used with the other two codes to identify the problem or ECP-S being reported on DA Form 5005-R.

(d) Environment. This is an alphanumeric code that is unique to either a particular hardware configuration or software operating system. The PM determines the use of the environment code until the deployment phase is completed. After that event, the ARA determines the use of this code.

d. Block 4. Point of contact. Enter the name and telephone number of the person who should be contacted to explain the reported problem or proposed change.

- e. Block 5. Priority. Complete this block for an ECP-S only. Check appropriate block.
- f. Block 6. Application CI baseline/version. Enter the baseline number of the SCP when the change was proposed or the problem occurred.
- g. Block 7. Executive software baseline/version. Enter the release number of the executive software used to control systems processing.
- h. Block 8. Problem date. Enter date when problem occurred. Date must be all numeric (YYMMDD).
- i. Block 9. Job/cycle/program identification. Enter the affected program, report, screen, or the like, with the identification assigned per TB 18-103.
- j. Block 10. Title of problem/change. Enter a short descriptive title of the problem or proposed change.
- k. Block 11. Description of problem/change. Describe the problem or proposed change in sufficient detail to permit ready identification and evaluation. Include copies of output, if applicable.
- l. Block 12. Effect on user. Describe adverse effects or improved characteristics that the proposed change may have on the user. Include the effects if the proposed change is not made.
- m. Block 13. Recommended solution/justification. Enter the recommended solution and justification to support the proposed change or action taken to resolve the problem.
- n. Block 14. Self-explanatory.
- o. Block 15. Remarks. Used by the originator to continue items 11, 12, and/or 13, if needed. If necessary, items 11 through 13 may be continued on separate sheets. If separate sheets are used, include the originator number from item 3 at the top of each sheet.
- p. Block 16. MACOM. Items 16 and 17 are completed by the CCB.
- q. Block 17. Items 18 through 29 are completed by the ARA and/or FP.

ENGINEERING CHANGE PROPOSAL - SOFTWARE (ECP-S)

ENGINEERING CHANGE PROPOSAL - SOFTWARE (ECP-S) For use of this form, see AR 25-3; the proponent agency is ODISC4.		(Check One) <input type="checkbox"/> PROBLEM REPORT <input type="checkbox"/> ECP-S
1. TO:		2. FROM:
3. ORIGINATOR NUMBER	4. POINT OF CONTACT (Name and telephone no.)	5. PRIORITY (Check one if ECP-S) <input type="checkbox"/> EMERGENCY <input type="checkbox"/> URGENT <input type="checkbox"/> ROUTINE
6. APPLICATION CI BASELINE/VERSION	7. EXECUTIVE SW/BASELINE/VERSION	8. PROBLEM DATE (YYMMDD)
9. JOB/CYCLE/PROGRAM ID		
10. TITLE OF PROBLEM/CHANGE		
11. DESCRIPTION OF PROBLEM/CHANGE (List all attachments and referenced documents) (If additional space is needed, use Item 15, Remarks)		
12. EFFECT ON USER (If additional space is needed, use Item 15, Remarks)		
13. RECOMMENDED SOLUTION/JUSTIFICATION (If additional space is needed, use Item 15, Remarks)		
14. DATE (YYMMDD)	NAME AND TITLE OF SUBMITTING AUTHORITY	SIGNATURE

DA FORM 5005-R, NOV 81 REPLACES DA FORM 4157-R, 1 FEB 76, WHICH IS OBSOLETE

ENGINEERING CHANGE PROPOSAL - SOFTWARE (ECP-S) (CONT.)

15. REMARKS (If additional space is needed, use separate sheet of paper)		
USER/MACOM ACTION (ECP-S Only)		
16. MACOM (Check one and include any comments) <input type="checkbox"/> APPROVE <input type="checkbox"/> DISAPPROVE		
17. DATE (YYMMDD)	NAME AND TITLE	SIGNATURE
ASSIGNED RESPONSIBLE AGENCY (Problem Report Only)		
18. PROBLEM REPORT ACTION TAKEN (Check one) <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> RESOLVED BY CUSTOMER ASSISTANCE <input type="checkbox"/> IDENTIFIED AS URGENT OR ROUTINE <input type="checkbox"/> EMERGENCY ECP FORMALIZED </div> <div> <input type="checkbox"/> DUPLICATE OF EXISTING ECP: NO: _____ <input type="checkbox"/> CANCELLED BY ORIGINATOR <input type="checkbox"/> CANCELLED FOR INSUFFICIENT IDENTIFICATION <input type="checkbox"/> CANCELLED FOR INSUFFICIENT DOCUMENTATION </div> </div>		
19. DATE (YYMMDD)	NAME AND TITLE	SIGNATURE
PROPONENT AGENCY and/or ASSIGNED RESPONSIBLE AGENCY (ECP-S Only)		
20. CLASS OF ECP (Check one) <input type="checkbox"/> I <input type="checkbox"/> II	21. JUSTIFICATION CODE	22. ECP NUMBER
23. ECP TYPE (Check one) <input type="checkbox"/> PRELIMINARY <input type="checkbox"/> FORMAL		24. ESTIMATED COST/SAVINGS
25. OTHER SYSTEM/CI AFFECTED		
26. CHANGE IDENTIFICATION (Check one in each column) <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> FUNCTIONAL/ALLOCATED <input type="checkbox"/> TECHNICAL/PRODUCT </div> <div> <input type="checkbox"/> MAJOR <input type="checkbox"/> MINOR </div> <div> <input type="checkbox"/> MAINTENANCE <input type="checkbox"/> MODIFICATION </div> </div>		
27. PROJECTED IMPLEMENTATION		
28. APPROVAL AUTHORITY (Check agency and action taken) <input type="checkbox"/> PROPONENT AGENCY <input type="checkbox"/> ASSIGNED RESPONSIBLE AGENCY <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED		
29. DATE (YYMMDD)	NAME AND TITLE	SIGNATURE

REVERSE OF DA FORM 5005-R, NOV 81